



TRANSACTION SLIP

Date: _____

Send ☐ Receive ☐

SENDER

✓ Name: _____

✓ Cellphone No.: _____

RECEIVER:

✓ Name: _____

✓ Cellphone No.: _____

REFERENCE NUMBER/ACCOUNT NUMBER (16 Digits)

| | | |
|---|---|---|
| - | - | - |
|---|---|---|

✓ Amount: _____
Service Fee: _____ Total: _____

✓ _____
Customer Signature Agent Signature



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